Form Approved. OMB No. 2050-0039 Please print or ty-e. (Form designed for use on elite (12-pitch) typewriter.) 2. Page 1 of 3. Emergency Response Phone 4. Manifest Tracking Number 1. Generator ID Number UNIFORM HAZARDOUS (801) 209-1731 WASTE MANIFEST Generator's Site Address (if different than mailing address) 5. Generator's Name and Mailing Address 77 WEST JE 3200 EAST ELM STREET CHICAGO, IL 60 **MONROE**, MI 48162 Generator's Phone: 6. Transporter 1 Company Name U.S. EPA ID Number 7. Transporter 2 Company Name 8. Designated Facility Name and Site Address U.S. EPA ID Number VAYNE DISFORML INC 49350 N I-94 SERVICE DUVE MID 048 090 633 BELLEVILLE, MI 48111 (800) 592-5489 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, 10. Containers 11. Total 9a. 12. Unit 13. Waste Codes and Packing Group (if any)) Quantity Wt./Vol. НМ No. Туре 1UN3432, Polychlorinated biphenyls, solid, 9, PGIII, ERG #171 001 DT PCB1 651 GENERATOR 20,000 14. Special Handling Instructions and Additional Information G123218WDI / PCB Sediment 24 Emergency Contact: Terry Lemasters (801)-209-1731 Storage Start Date: 8-1-12 Unio Unique Container ID#: 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true Generator's/Offeror's Printed/Typed Name Day Year 16. International Shipments Export from U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S. 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Transporter 2 Printed/Typed Name Signature 18. Discrepancy 18a. Discrepancy Indication Space Type Quantity Residue ___ Partial Rejection Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

Signature

Printed/Typed Name

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Jacob Wilson

Month

08

Day

FOR MANIFESTED PCB WASTE

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This certificate is to verify the wastes identified as
and specified on Manifest # <u>009957224</u>), Line Item <u>1</u> has been landfilled on
Wayne Disposal, Inc.
(EPA I.D. # MID048090633)
49350 N. I-94 Service Drive, Belleville, Michigan 48111 Telephone: 1-800-KWALITY (592-5489) Fax: 1-800-KWALFAX (592-5329)
Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate and complete. A to the identified section(s) of this document for which I cannot personally verify truth and accuracy. I certify as the company official having supervisory responsibility for the persons who are acting under my direct instructions made the verification that this information is true accurate and complete. Authorized Signature:





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08/16/2012

neopost

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